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| Jeff A. Holmen | (Depositor's ####) |
|------------------|--------------------|
| alla Hel | (Signature) |
| January 22, 2007 | (Date) |

| APPLICATION NO. | PILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|-----------------------------|-------------------------|------------------|
| 09/847,751 | 05/02/2001 | VanWinkle (Van) T. Townsend | FE-00494 (L250.109.101) | 6075 |

TITLE OF INVENTION: TELEMETRY SYSTEM AND METHOD FOR ACOUSTIC ARRAYS

| APPLN TYPE SMALL ENTITY ISSUE FEB DUE PUBLICATION FEB DUE PREV. FAID ISSUE FEB TOTAL FEB(S) DUE DATE nonprovisional NO \$1400 \$300 \$0 \$1700 01/29/ EXAMINER ART UNIT CLASS-SUBCLASS LI, SHI K 2613 398-169000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address Indication (or "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has be recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNER LI, SHI K 2613 398-169000 2. For printing on the patent front page, list (1) the names of up to 3 registared patent attorneys or agent) and the names of up to 2 registered attorney or agent) and the names of up to 3 registared patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee to fall will appear on the patent. If an assignment is identified below, the document has be recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Bethesda, Maryland, USA Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Or Control of Profes): (Please first reapply any previously paid Issue fee shown above) 4a. The following fee(s) are submitted: 4b. Payment of Peo(s): (Please first reapply any previously paid Issue fee shown above) | | | | | |
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| EXAMINER ART UNIT CLASS-SUBCLASS LL, SHI K 2613 398-169000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SBI/42) attached. "Pee Address" Indication (or "Fee Address" Indication form PTO/SBI/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLRASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has be recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Bethesda, Maryland, USA Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Indi | DUB . | | | | |
| LI, SHI K 2613 398-169000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form FTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has be recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Bethesda, Maryland, USA Please check the appropriate assignee category or categories (will not be printed on the patent): 1 Dicke, Billig & (1) the name of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents and the names of up to 2 registered attorney or agents. If no name is listed, no name will be printed. 2 Dicke, Billig & (2) the name of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up to 3 registored patent attorneys or agents of up t | 2007 | | | | |
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| CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Pec Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has be recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE LOCKHEED MARTIN CORPORATION (B) RESIDENCE: (CITY and STATE OR COUNTRY) Bethesda, Maryland, USA Please check the appropriate assignce category or categories (will not be printed on the patent): [Individual Corporation or other private group entity or agents of patent attorneys or agents and the names of up to 2 registered attorney or agent) and the names of up to 2 regist | | | | | |
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| Authorized Signature Mac 122/07 | - · · | | | | |
| Typed or printed name Jeff X. Holmen Registration No. 38,492 | | | | | |
| This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Do NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. | | | | | |

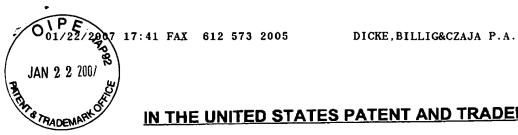
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| Applicant: | VanWinkle T. Townsend | Examiner: | Shi K. LI |
|-----------------------------------|--|--|---|
| Serial No.: | 09/847,751 | Group Art Unit: | 2613 |
| Filed: | May 2, 2001 | Docket No.: | L250.109.101 / FE-00494 |
| Title: | TELEMETRY SYSTEM AND METHOD FOR | ACOUSTIC ARRAY | <u>′</u> S |
| P.O. Box 14 Alexandria Sir: | ner for Patents | | |
| | mittal Sheet containing Certificate of Tran Issue Fee Transmittal, Form PTOL-85B (1 | | C.F.R. 1.8 (1 pg.) |
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